

U. S. SOCIAL SECURITY ACT
APPLICATION FOR ACCOUNT NUMBER

EACH ITEM SHOULD BE FILLED IN. IF ANY ITEM IS NOT KNOWN WRITE "UNKNOWN"

075-12-4830

PRINT NAME	
1. <u>Tojiro</u> (EMPLOYEE'S FIRST NAME)	(none) (MIDDLE NAME)
<u>Kozawa</u> (LAST NAME)	
2. _____ (STREET AND NUMBER)	3. <u>Lahaina, Maui</u> (POST OFFICE)
<u>T. H.</u> (STATE)	
4. <u>Pioneer Mill Company, Limited</u> (BUSINESS NAME OF PRESENT EMPLOYER)	5. <u>Lahaina, Maui</u> (BUSINESS ADDRESS OF PRESENT EMPLOYER)
6. <u>58</u> (AGE AT LAST BIRTHDAY)	7. <u>April 10, 1880</u> (DATE OF BIRTH: (MONTH) (DAY) (YEAR) (SUBJECT TO LATER VERIFICATION))
8. <u>Yamaguchi, Japan</u> (PLACE OF BIRTH)	
9. <u>Saizu Kozawa (Deceased)</u> (FATHER'S FULL NAME, REGARDLESS OF WHETHER LIVING OR DEAD)	10. <u>Satu Akimoto (Deceased)</u> (MOTHER'S FULL MAIDEN NAME, REGARDLESS OF WHETHER LIVING OR DEAD)
11. SEX: MALE ☒ FEMALE _____ (CHECK (X) WHICH)	12. COLOR: WHITE _____ NEGRO _____ OTHER <u>Japanese</u> (CHECK (X) WHICH) (SPECIFY)
13. GIVE DATE YOU BECAME AN EMPLOYEE (IF YOU BEGAN EMPLOYMENT AFTER NOV. 24, 1936) _____	
14. HAVE YOU FILLED OUT A CARD LIKE THIS BEFORE? <u>No</u> (IF ANSWER IS "YES" ENTER PLACE AND DATE OF ORIGINAL FILING AND REASONS FOR FILING AGAIN)	
15. <u>July 19, 1938</u> (DATE SIGNED)	16. <u>Tojiro Kozawa</u> (EMPLOYEE'S SIGNATURE - USUALLY WRITTEN - DO NOT PRINT)

DETACH ALONG THIS LINE WITNESS: